

GIFTOR AUTHORIZATION

Account owner: Please use this form to name one or more individuals who can contribute money to your account and receive information about their gifts (giftors). Each giftor will receive a personal coupon book to use in the future. All gifts to your account belong to you.

Current Account Information

Account Number	<hr/>	
Account Owner	<hr/>	
	Name	SSN or TIN
Student Beneficiary	<hr/>	
	Name	SSN or TIN

Giftor Information	1.	2.
Name (First, Middle, Last, Suffix)	<hr/>	<hr/>
SSN or TIN	<hr/>	<hr/>
Birth Date	<hr/>	<hr/>
Street Address/Apartment Number	<hr/>	<hr/>
Post Office Box Number	<hr/>	<hr/>
City / State / Zip Code	<hr/>	<hr/>
Email Address	<hr/>	<hr/>
Telephone Number(s)	<hr/>	<hr/>
	Home Work	Home Work

☐ Please check here if you want to register the giftors as a couple and receive only one coupon book.

Account Owner's Signature - Required

Only the account owner may authorize changes to this account.

I certify under penalty of perjury that I am the legal account owner. I authorize the giftor(s) designated above to obtain information about their gift to this Guaranteed Education Tuition Program account and to receive a personal gift coupon book.

<hr/>	<hr/>
Account Owner's Signature	Date

Send to: Guaranteed Education Tuition, P.O. Box 43450, Olympia, WA 98504-3450 or 360-704-6200 (Fax)

Questions: GETInfo@hecb.wa.gov or 1-800-955-2318